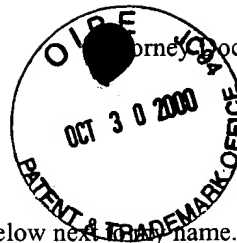


DECLARATION



Attorney's Pocket No: 5053-27900

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled "**SYSTEM AND METHOD FOR EXTERNALIZATION OF FORMULAS FOR ASSESSING DAMAGES**", the specification of which:

- ☐ is attached hereto.
☒ was filed on June 23, 2000 as Application Serial No. 09/603,308
and was amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability of the subject matter claimed in this application, as "materiality" is defined in 37 C.F.R. § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate listed below, or under § 365(a) of any PCT international application listed below designating least one country other than the United States of America, and have identified below any foreign application for patent or inventor's certificate, or of any PCT international application, having a filing date before that of the application on which priority is claimed.

<u>Prior Foreign Application No.</u>	<u>Country</u>	<u>Filing Date</u> <u>(mm/dd/yy)</u>	<u>Priority</u> <u>Claimed</u>	<u>Cert. copy</u> <u>Attached</u>
N/A				

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

<u>Provisional Application No.</u>	<u>Filing Date</u> <u>(mm/dd/yy)</u>
N/A	

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s) listed below, or under § 365(c) of any PCT international application listed below designating the United States of America, and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose all information known to me to be material to the patentability of the subject matter claimed in this application, as "materiality" is defined in 37 C.F.R. § 1.56, which became available between the filing date of the prior application and the national or PCT international filing date of this application.

<u>Parent Application No.</u>	<u>Filing Date</u> <u>(mm/dd/yy)</u>	<u>Parent Patent No. (if applicable) or Status</u>
N/A		

Please direct all communications to:

Eric B. Meyertons
Conley, Rose & Tayon, P.C.
P.O. Box 398
Austin, Texas 78767-0398
Phone: (512) 476-1400

I hereby declare that all statements made herein of my own knowledge are true and that all statements made herein on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor's Full Name: Brian Wolfe
Inventor's Signature: Brian Wolfe Date: 10/18/2000
City and State (or Foreign Country) of Residence: Austin, TX Citizenship: USA
Post Office and Residence Address: 13545 Anacross Loop, Austin, TX 78727
(Include number, street name, city, state and zip code)

Inventor's Full Name: Allison W. Spann
Inventor's Signature: _____ Date: _____
City and State (or Foreign Country) of Residence: _____ Citizenship: _____
Post Office and Residence Address: _____
(Include number, street name, city, state and zip code)

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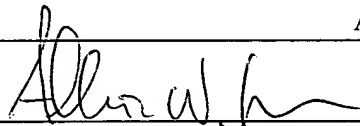
Inventor's Full Name: Brian Wolfe

Inventor's Signature: _____ Date: _____

City and State (or Foreign Country) of Residence: _____ Citizenship: _____

Post Office and Residence Address: _____
(Include number, street name, city, state and zip code)

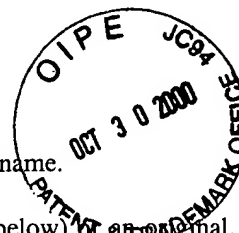
Inventor's Full Name: Allison W. Spann

Inventor's Signature:  Date: 10-12-00

City and State (or Foreign Country) of Residence: PFLUGERVILLE, TX Citizenship: USA

Post Office and Residence Address: 1235 GAZANIA DRIVE PFLUGERVILLE, TX 78660
(Include number, street name, city, state and zip code)

DECLARATION



[Handwritten signature]

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled "**SYSTEM AND METHOD FOR EXTERNALIZATION OF FORMULAS FOR ASSESSING DAMAGES**", the specification of which:

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<u>Prior Foreign Application No.</u>	<u>Country</u>	<u>Filing Date</u> <u>(mm/dd/yy)</u>	<u>Priority</u> <u>Claimed</u>	<u>Cert. copy</u> <u>Attached</u>
N/A				

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<u>Provisional Application No.</u>	<u>Filing Date</u> <u>(mm/dd/yy)</u>
N/A	

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<u>Parent Application No.</u>	<u>Filing Date</u> <u>(mm/dd/yy)</u>	<u>Parent Patent No. (if applicable) or Status</u>
N/A		